

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Baxter Healthcare Political Action Committee

ADDRESS (number and street) ▼

1501 K Street, NW

Suite 375

☐ Check if different than previously reported. (ACC)

Washington

DC

20005

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00117838

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☒ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ General (12G)☐ Runoff (12R)☐ Convention (12C)☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
02 01 2015

through

M M M / D D D / Y Y Y Y Y Y  
02 28 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Sarah Creviston

Signature of Treasurer

Sarah Creviston

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
03 13 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Baxter Healthcare Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y 02 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y 02 / 28 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> 2015		56284.59
(b) Cash on Hand at Beginning of Reporting Period.....	73190.06	
(c) Total Receipts (from Line 19) .....	11352.51	28257.98
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	84542.57	84542.57
7. Total Disbursements (from Line 31) .....	0.00	0.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	84542.57	84542.57
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**Baxter Healthcare Political Action Committee**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	1	5

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5236.53	9302.60
(ii) Unitemized .....	6115.98	18955.38
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	11352.51	28257.98
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	11352.51	28257.98
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	11352.51	28257.98
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	11352.51	28257.98

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0.00	0.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	0.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	11352.51	28257.98
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	11352.51	28257.98
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	0.00	0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 23

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Baxter Healthcare Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Michael J. Baughman**

Mailing Address 5343 N Lakewood Ave

City State Zip Code  
 Chicago IL 60640-2208

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Healthcare Corporation

Occupation

VP, Finance - Med Products

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

02 / 13 / 2015

**Transaction ID : 20150217122235-77**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Michael J. Baughman**

Mailing Address 5343 N Lakewood Ave

City State Zip Code  
 Chicago IL 60640-2208

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Healthcare Corporation

Occupation

VP, Finance - Med Products

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

02 / 27 / 2015

**Transaction ID : 20150313133747-98**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Edwin A. Betancourt**

Mailing Address 2704 Oakmont Ct

City State Zip Code  
 Weston FL 33332-1834

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Export Corporation

Occupation

VP, Ops - MP LA Area

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.80

Date of Receipt

02 / 13 / 2015

**Transaction ID : 20150217122235-231**

Amount of Each Receipt this Period

54.76

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

254.76

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 23  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Baxter Healthcare Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Edwin A. Betancourt**

Mailing Address 2704 Oakmont Ct

City

Weston

State

FL

Zip Code

33332-1834

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Export Corporation

Occupation

VP, Ops - MP LA Area

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

273.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2015

**Transaction ID : 20150313133747-257**

Amount of Each Receipt this Period

54.76

Full Name (Last, First, Middle Initial)

**B. Susan K. Brown**

Mailing Address 917 Geneva St

City

Glendale

State

CA

Zip Code

91207-1707

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Healthcare Corporation

Occupation

VP, Mfg - Plasma

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

393.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2015

**Transaction ID : 20150217122235-248**

Amount of Each Receipt this Period

78.72

Full Name (Last, First, Middle Initial)

**C. Susan K. Brown**

Mailing Address 917 Geneva St

City

Glendale

State

CA

Zip Code

91207-1707

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Healthcare Corporation

Occupation

VP, Mfg - Plasma

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

393.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2015

**Transaction ID : 20150313133747-279**

Amount of Each Receipt this Period

78.72

**SUBTOTAL** of Receipts This Page (optional)..... ►

212.20

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 23  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Baxter Healthcare Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Sebastian J. Bufalino**

Mailing Address 1091 Pine Meadow Ct

City State Zip Code  
 Vernon Hills IL 60061-2572

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter International Inc.

Occupation

CVP, Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.88

Date of Receipt

02 / 13 / 2015

**Transaction ID : 20150217122235-48**

Amount of Each Receipt this Period

70.19

Full Name (Last, First, Middle Initial)

**B. Sebastian J. Bufalino**

Mailing Address 1091 Pine Meadow Ct

City State Zip Code  
 Vernon Hills IL 60061-2572

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter International Inc.

Occupation

CVP, Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.88

Date of Receipt

02 / 27 / 2015

**Transaction ID : 20150313133747-70**

Amount of Each Receipt this Period

72.12

Full Name (Last, First, Middle Initial)

**C. Dori Capretti**

Mailing Address 2420 Sidney St

City State Zip Code  
 Pittsburgh PA 15203-2117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Healthcare Corporation

Occupation

Payor Account Exec, Bio

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

02 / 27 / 2015

**Transaction ID : 20150313133747-198**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

192.31

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 23

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Baxter Healthcare Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Harriet Clemons**

Mailing Address 1255 Town Center Rd  
Unit 3Q

City State Zip Code  
Vernon Hills IL 60061-4194

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Healthcare Corporation

Occupation

Sr Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2015

**Transaction ID : 20150313133747-199**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. Mark Coin**

Mailing Address 1006 S St NW

City State Zip Code  
Washington DC 20001-5073

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Healthcare Corporation

Occupation

Director, Public and Reimburse

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.25

Date of Receipt

MM / DD / YYYY  
02 / 27 / 2015

**Transaction ID : 20150313133747-190**

Amount of Each Receipt this Period

46.85

Full Name (Last, First, Middle Initial)

## **C. Sarah L. Creviston**

Mailing Address 23 Wynstone Way

City State Zip Code  
North Barrington IL 60010-6950

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Healthcare Corporation

Occupation

VP, Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

594.75

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2015

**Transaction ID : 20150217122235-49**

Amount of Each Receipt this Period

118.95

**SUBTOTAL** of Receipts This Page (optional)..... ►

215.80

**TOTAL** This Period (last page this line number only)..... ►

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 23  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Baxter Healthcare Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Sarah L. Creviston**

Mailing Address 23 Wynstone Way

City State Zip Code  
North Barrington IL 60010-6950

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Baxter Healthcare Corporation VP, Government Affairs

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

594.75

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 27 / 2015

**Transaction ID : 20150313133747-69**

Amount of Each Receipt this Period

118.95

Full Name (Last, First, Middle Initial)

**B. Margarita Cruz-casse**

Mailing Address 153 Calle Violeta

City State Zip Code  
San Juan PR 00927-6208

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Baxter Dir, Logistics

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.65

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 13 / 2015

**Transaction ID : 20150217122235-27**

Amount of Each Receipt this Period

58.13

Full Name (Last, First, Middle Initial)

**c. Margarita Cruz-casse**

Mailing Address 153 Calle Violeta

City State Zip Code  
San Juan PR 00927-6208

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Baxter Dir, Logistics

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.65

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 27 / 2015

**Transaction ID : 20150313133747-41**

Amount of Each Receipt this Period

58.13

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

235.21

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 23  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Baxter Healthcare Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Barry M. Deutsch**

Mailing Address 2330 W Course Dr

City State Zip Code  
 Riverwoods IL 60015-1768

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Baxter Healthcare Corporation VP I, Business Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.05

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 27 2015

**Transaction ID : 20150313133747-134**

Amount of Each Receipt this Period

48.81

Full Name (Last, First, Middle Initial)

**B. Rodney R. Dickson**

Mailing Address 105 Lakeside Pl

City State Zip Code  
 Highland Park IL 60035-5316

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Baxter Healthcare Corporation Dir, Reimbursement Initiatives

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 27 2015

**Transaction ID : 20150313133747-90**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Alex Blaine Forshage**

Mailing Address 909 Oakwood Ave

City State Zip Code  
 Lake Forest IL 60045-1718

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Baxter Healthcare Corporation VP, Sls & Mkt - US BioT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 27 2015

**Transaction ID : 20150313133747-166**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

148.81

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 OF 23

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Baxter Healthcare Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Valery E. Gallagher**

Mailing Address 14334 Spring Meadow Ct

City

Libertyville

State

IL

Zip Code

60048-2490

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Healthcare Corporation

Occupation

Dir, State Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.55

Date of Receipt

02 / 13 / 2015

**Transaction ID : 20150217122235-95**

Amount of Each Receipt this Period

86.31

Full Name (Last, First, Middle Initial)

**B. Valery E. Gallagher**

Mailing Address 14334 Spring Meadow Ct

City

Libertyville

State

IL

Zip Code

60048-2490

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Healthcare Corporation

Occupation

Dir, State Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.55

Date of Receipt

02 / 27 / 2015

**Transaction ID : 20150313133747-117**

Amount of Each Receipt this Period

86.31

Full Name (Last, First, Middle Initial)

**c. Arthur J. Gibson**

Mailing Address 3775 Riverly Trce

City

Marietta

State

GA

Zip Code

30067-4241

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Healthcare Corporation

Occupation

VP, Environ, Health & Safety

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.10

Date of Receipt

02 / 13 / 2015

**Transaction ID : 20150217122235-90**

Amount of Each Receipt this Period

62.42

**SUBTOTAL** of Receipts This Page (optional)..... ►

235.04

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 23  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Baxter Healthcare Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Arthur J. Gibson**

Mailing Address 3775 Riverly Trce

City State Zip Code  
 Marietta GA 30067-4241

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Healthcare Corporation

Occupation

VP, Environ, Health & Safety

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 27 / 2015

**Transaction ID : 20150313133747-112**

Amount of Each Receipt this Period

62.42

Full Name (Last, First, Middle Initial)

**B. Loyd Kenneth Harper**

Mailing Address 1860 Fairport Dr

City State Zip Code  
 Grayslake IL 60030-7947

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter

Occupation

Dir, Payer & Channel Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 27 / 2015

**Transaction ID : 20150313133747-267**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Laurie R. Hernandez**

Mailing Address 1340 Crest Rd

City State Zip Code  
 Libertyville IL 60048-1515

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Healthcare Corporation

Occupation

VP, Strategy & Integration

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 13 / 2015

**Transaction ID : 20150217122235-125**

Amount of Each Receipt this Period

60.14

**SUBTOTAL** of Receipts This Page (optional)..... ►

172.56

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 OF 23

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Baxter Healthcare Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Laurie R. Hernandez**

Mailing Address 1340 Crest Rd

City

Libertyville

State

IL

Zip Code

60048-1515

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Healthcare Corporation

Occupation

VP, Strategy & Integration

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2015

**Transaction ID : 20150313133747-142**

Amount of Each Receipt this Period

60.14

Full Name (Last, First, Middle Initial)

**B. Robert J. Hombach**

Mailing Address 126 Homewood Ave

City

Libertyville

State

IL

Zip Code

60048-2122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter International Inc.

Occupation

CVP, Chief Financial Officer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2015

**Transaction ID : 20150313133747-229**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Irene P. Jakimcius**

Mailing Address 2208 Wesley Ave

City

Evanston

State

IL

Zip Code

60201-2648

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter International Inc.

Occupation

Assoc General Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

464.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2015

**Transaction ID : 20150217122235-36**

Amount of Each Receipt this Period

92.85

**SUBTOTAL** of Receipts This Page (optional)..... ►

202.99

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 23  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Baxter Healthcare Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Irene P. Jakimcius**

Mailing Address 2208 Wesley Ave

City State Zip Code  
 Evanston IL 60201-2648

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Baxter International Inc.

Occupation  
 Assoc General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 27 / 2015

**Transaction ID : 20150313133747-55**

Amount of Each Receipt this Period

92.85

Full Name (Last, First, Middle Initial)

**B. Michael T. Jennings**

Mailing Address 130 W Lincoln Ave

City State Zip Code  
 Libertyville IL 60048-2721

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Baxter Healthcare Corporation

Occupation  
 Sr Dir, Strategy & Integration

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.80

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 27 / 2015

**Transaction ID : 20150313133747-72**

Amount of Each Receipt this Period

43.56

Full Name (Last, First, Middle Initial)

**C. Julie S. Kim**

Mailing Address PO Box 747  
 Baxter Expat Admin

City State Zip Code  
 Deerfield IL 60015-0747

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Baxter Healthcare Corporation

Occupation  
 GM, UK & Ireland

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 13 / 2015

**Transaction ID : 20150217122235-60**

Amount of Each Receipt this Period

67.31

**SUBTOTAL** of Receipts This Page (optional)..... ►

203.72

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 23  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Baxter Healthcare Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Julie S. Kim**

Mailing Address PO Box 747

Baxter Expat Admin

City

Deerfield

State

IL

Zip Code

60015-0747

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Healthcare Corporation

Occupation

GM, UK & Ireland

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2015

**Transaction ID : 20150313133747-85**

Amount of Each Receipt this Period

67.31

Full Name (Last, First, Middle Initial)

**B. Sherryl L. King**

Mailing Address 1240 S Walnut Ave

City

Arlington Heights

State

IL

Zip Code

60005-3056

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Healthcare Corporation

Occupation

VP, Bus Analytics - BioScience

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2015

**Transaction ID : 20150313133747-82**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Timothy P. Lawrence**

Mailing Address 1175 Museum Blvd

Unit 210

City

Vernon Hills

State

IL

Zip Code

60061-3156

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Healthcare Corporation

Occupation

VP, Mfg & SC - Med Products

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2015

**Transaction ID : 20150217122235-46**

Amount of Each Receipt this Period

78.50

**SUBTOTAL** of Receipts This Page (optional)..... ►

195.81

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Baxter Healthcare Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Timothy P. Lawrence**

Mailing Address 1175 Museum Blvd  
Unit 210

City State Zip Code  
Vernon Hills IL 60061-3156

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Healthcare Corporation

Occupation

VP, Mfg & SC - Med Products

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2015

**Transaction ID : 20150313133747-76**

Amount of Each Receipt this Period

78.50

Full Name (Last, First, Middle Initial)

**B. Kelli Lester**

Mailing Address 3623 Stanford Cir

City State Zip Code  
Falls Church VA 22041-1316

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Healthcare Corporation

Occupation

Dir, Govt Affs & Alliance Dev

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2015

**Transaction ID : 20150313133747-143**

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

**C. Ronald K. Lloyd**

Mailing Address 2 W Delaware Pl  
Unit 2603

City State Zip Code  
Chicago IL 60610-3416

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Healthcare Corporation

Occupation

GFH, BioTherapeutics

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2015

**Transaction ID : 20150313133747-102**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

173.50

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 23  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Baxter Healthcare Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Jeanne K. Mason**

Mailing Address 1760 Duffy Ln

City

Bannockburn

State

IL

Zip Code

60015-1512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter International Inc.

Occupation

CVP, Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1019.22

Date of Receipt

02 / 13 / 2015

**Transaction ID : 20150217122235-96**

Amount of Each Receipt this Period

202.69

Full Name (Last, First, Middle Initial)

**B. Jeanne K. Mason**

Mailing Address 1760 Duffy Ln

City

Bannockburn

State

IL

Zip Code

60015-1512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter International Inc.

Occupation

CVP, Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1019.22

Date of Receipt

02 / 27 / 2015

**Transaction ID : 20150313133747-116**

Amount of Each Receipt this Period

208.46

Full Name (Last, First, Middle Initial)

**c. Chris C. Miskel**

Mailing Address 1950 Lake Charles Dr

City

Vernon Hills

State

IL

Zip Code

60061-4578

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Healthcare Corporation

Occupation

VP, Nat Accts - US BioScience

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.10

Date of Receipt

02 / 13 / 2015

**Transaction ID : 20150217122235-227**

Amount of Each Receipt this Period

53.22

**SUBTOTAL** of Receipts This Page (optional)..... ►

464.37

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 23  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Baxter Healthcare Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Chris C. Miskel**

Mailing Address 1950 Lake Charles Dr

City

Vernon Hills

State

IL

Zip Code

60061-4578

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Healthcare Corporation

Occupation

VP, Nat Accts - US BioScience

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2015

**Transaction ID : 20150313133747-252**

Amount of Each Receipt this Period

53.22

Full Name (Last, First, Middle Initial)

**B. Peter J. O'Malley**

Mailing Address 791 Summit Ave

City

Lake Forest

State

IL

Zip Code

60045-1830

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Healthcare Corporation

Occupation

VP, Mkt Access - US BioScience

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2015

**Transaction ID : 20150313133747-15**

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

**C. Robert L. Parkinson**

Mailing Address 1332 Edgewood Ln

City

Northbrook

State

IL

Zip Code

60062-4716

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter International Inc.

Occupation

Chairman, President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2951.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2015

**Transaction ID : 20150217122235-79**

Amount of Each Receipt this Period

590.38

**SUBTOTAL** of Receipts This Page (optional)..... ►

688.60

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 OF 23

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Baxter Healthcare Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Robert L. Parkinson**

Mailing Address 1332 Edgewood Ln

City

Northbrook

State

IL

Zip Code

60062-4716

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter International Inc.

Occupation

Chairman, President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2951.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2015

**Transaction ID : 20150313133747-103**

Amount of Each Receipt this Period

590.38

Full Name (Last, First, Middle Initial)

**B. Linda J. Peters**

Mailing Address 14866 Sanctuary Ln

City

Libertyville

State

IL

Zip Code

60048-9611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Healthcare Corporation

Occupation

VP, RA - Med Products

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2015

**Transaction ID : 20150217122235-256**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**c. Linda J. Peters**

Mailing Address 14866 Sanctuary Ln

City

Libertyville

State

IL

Zip Code

60048-9611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Healthcare Corporation

Occupation

VP, RA - Med Products

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2015

**Transaction ID : 20150313133747-191**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

790.38

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 OF 23

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Baxter Healthcare Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Carla D. Pittman**

Mailing Address 3933 Kenway Ave

City

Los Angeles

State

CA

Zip Code

90008-4805

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Healthcare Corporation

Occupation

Sr Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2015

**Transaction ID : 20150217122235-57**

Amount of Each Receipt this Period

72.12

Full Name (Last, First, Middle Initial)

**B. Carla D. Pittman**

Mailing Address 3933 Kenway Ave

City

Los Angeles

State

CA

Zip Code

90008-4805

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Healthcare Corporation

Occupation

Sr Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2015

**Transaction ID : 20150313133747-83**

Amount of Each Receipt this Period

72.12

Full Name (Last, First, Middle Initial)

**C. Roibin Ryan**

Mailing Address 1419 W Berteau Ave

City

Chicago

State

IL

Zip Code

60613-1914

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter International Inc.

Occupation

Deputy Gen Counsel, Lit & Empl

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

543.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2015

**Transaction ID : 20150217122235-234**

Amount of Each Receipt this Period

108.62

**SUBTOTAL** of Receipts This Page (optional)..... ►

252.86

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Baxter Healthcare Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Roibin Ryan**

Mailing Address 1419 W Berteau Ave

City  
Chicago

State  
IL

Zip Code  
60613-1914

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter International Inc.

Occupation

Deputy Gen Counsel, Lit & Empl

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

543.10

Date of Receipt

02 / 27 / 2015

**Transaction ID : 20150313133747-259**

Amount of Each Receipt this Period

108.62

Full Name (Last, First, Middle Initial)

**B. David P. Scharf**

Mailing Address 931 Oak St

City  
Winnetka

State  
IL

Zip Code  
60093-2440

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter International Inc.

Occupation

CVP, General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

631.17

Date of Receipt

02 / 13 / 2015

**Transaction ID : 20150217122235-88**

Amount of Each Receipt this Period

125.58

Full Name (Last, First, Middle Initial)

**c. David P. Scharf**

Mailing Address 931 Oak St

City  
Winnetka

State  
IL

Zip Code  
60093-2440

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter International Inc.

Occupation

CVP, General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

631.17

Date of Receipt

02 / 27 / 2015

**Transaction ID : 20150313133747-109**

Amount of Each Receipt this Period

128.85

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

363.05

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 23 OF 23

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Baxter Healthcare Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Onelia Ann Vera**

Mailing Address 619 Oleander Dr

City

Hallandale Beach

State

FL

Zip Code

33009-6531

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Healthcare Corporation

Occupation

Assoc General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

586.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2015

**Transaction ID : 20150217122235-155**

Amount of Each Receipt this Period

117.28

Full Name (Last, First, Middle Initial)

**B. Onelia Ann Vera**

Mailing Address 619 Oleander Dr

City

Hallandale Beach

State

FL

Zip Code

33009-6531

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Baxter Healthcare Corporation

Occupation

Assoc General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

586.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 27 / 2015

**Transaction ID : 20150313133747-174**

Amount of Each Receipt this Period

117.28

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

234.56

5236.53